

**Notice:** The Department of Natural Resources has authority to inspect vehicles used by persons engaged in the business of servicing holding tanks, septic tanks, seepage pits, grease traps or privies as found in s. NR 113.06(1), Wis. Adm. Code. Vehicle requirements are found in s. NR 113.06(2), Wis. Adm. Code. Personally identifiable information on this form is not intended to be used for any other purpose but may be made available to requesters under Wisconsin's Open Records law ss. 19.31-19.39, Wis. Stats.

(Please type or print with ink) **Important:** Use a separate form for each vehicle.

### Business Information

Name of Business Owner	Telephone Number (include area code)		
Name of Business	Business License Number (if licensed)		
Address	City	State	ZIP Code

### Vehicle Information

This vehicle is:

- ☐ An **original** or **added** truck to our fleet (Requires a \$50 Fee).  
☐ A **replacement** truck for Licensed Truck# \_\_\_\_\_ (No Fee Required)  
(Vehicle ID Number)

Vehicle ID Number	License Plate Number	<input type="checkbox"/> Applied For
Truck Year and Make	Tank Capacity (gallons)	

### Inspection of Vehicle and Equipment

Satisfactory (S); Unsatisfactory (U) **(Unsatisfactory conditions shall be corrected within thirty days.)**

	S	U		S	U
1. Servicing Tank:			6. Pumps:		
a. Leak-proof.	<input type="checkbox"/>	<input type="checkbox"/>	a. Installed to prevent backflow or leakage.	<input type="checkbox"/>	<input type="checkbox"/>
b. Tightly closed while in transit or storage.	<input type="checkbox"/>	<input type="checkbox"/>	b. Connections shall be capped or sealed when not in use.	<input type="checkbox"/>	<input type="checkbox"/>
c. Constructed of suitable metal with inertia baffles.	<input type="checkbox"/>	<input type="checkbox"/>	7. Splash plate.	<input type="checkbox"/>	<input type="checkbox"/>
d. Mounted on truck chassis.	<input type="checkbox"/>	<input type="checkbox"/>	8. Equipment washing facilities available and located to prevent nuisances.	<input type="checkbox"/>	<input type="checkbox"/>
2. That the words "Wisconsin Sanitary Licensee" and immediately under these words "License No." are painted on each side of the vehicle with letters and numbers at least 2" high in distinct color contrast to its background.	<input type="checkbox"/>	<input type="checkbox"/>	9. Vehicle and equipment stored in nuisance free manner.	<input type="checkbox"/>	<input type="checkbox"/>
3. Capacity of tank in gallons printed on rear end of vehicle used by any licensee in contrasting color with letters and numbers at least 2" high.	<input type="checkbox"/>	<input type="checkbox"/>	10. Disinfectant carried on vehicle.	<input type="checkbox"/>	<input type="checkbox"/>
4. Tank capacity meets requirements.	<input type="checkbox"/>	<input type="checkbox"/>	11. Documents carried in each vehicle:		
5. Discharge Values:			a. NR 113	<input type="checkbox"/>	<input type="checkbox"/>
a. Cab controlled discharge valve required July 1, 1997 (s. NR 113.06(2)(n)).	<input type="checkbox"/>	<input type="checkbox"/>	b. Spill Plan	<input type="checkbox"/>	<input type="checkbox"/>
b. Watertight.	<input type="checkbox"/>	<input type="checkbox"/>	c. Vehicle Log	<input type="checkbox"/>	<input type="checkbox"/>
c. Located and installed to permit unobstructed discharge.	<input type="checkbox"/>	<input type="checkbox"/>			

Inspected By	Date
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I agree to correct any unsatisfactory conditions noted on this inspection report within thirty days, and to notify the appropriate DNR Regional Office that the vehicle(s) is ready for a follow-up inspection.

Signature of Business Owner / Operator	Date
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